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## BIB DATA SHEET

CONFIRMATION NO. 1208

<b>SERIAL NUMBER</b> 10/017,213	<b>FILING or 371(c) DATE</b> 12/14/2001 <b>RULE</b>	<b>CLASS</b> 324	<b>GROUP ART UNIT</b> 3737	<b>ATTORNEY DOCKET NO.</b> S13.12-0111
<b>APPLICANTS</b> Scott R. Smith, Chaska, MN; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 03/20/2002				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input type="checkbox"/> No Verified and /PARIKHA SOLANKI MEHTA/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWINGS</b> 7	<b>TOTAL CLAIMS</b> 85 55 PSM
<b>INDEPENDENT CLAIMS</b> 2 3 PSM				
<b>ADDRESS</b> FISH & RICHARDSON P.C. PO BOX 1022 MINNEAPOLIS, MN 55440-1022 UNITED STATES				
<b>TITLE</b> Recanalization of occluded vessel using magnetic resonance guidance				
<b>FILING FEE RECEIVED</b> 1910	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	